

P14000005777

(Requestor's Name)

(Address)

(Address)

(City/State/Zip/Phone #)

☐ PICK-UP

☐ WAIT

☐ MAIL

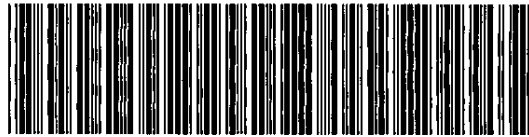
(Business Entity Name)

(Document Number)

Certified Copies _____ Certificates of Status _____

Special Instructions to Filing Officer:

Office Use Only



400271807324

04/23/15--01016--011 **35.00

*Resignation
of officer*

RECEIVED
SECRETARY OF STATE
TALLAHASSEE, FLORIDA

2015 APR 23 PM 4:00

FILED

*DR
4/29/15*

TRANSMITTAL LETTER

TO: Amendment Section
Division of Corporations

SUBJECT: MDA transportation company
(Name of Corporation)

DOCUMENT NUMBER: P14000005777

The enclosed Officer/Director Resignation for a Corporation and fee are submitted for filing.

Please return all correspondence concerning this matter to the following:

Maikel Gomez
(Name of Person)

MDA Transportation Company
(Name of Firm/Company)

PO BOX 28587
(Address)

Tallahassee, FL 32302
(City/State and Zip Code)

For further information concerning this matter, please call:

Maikel Gomez at (305) 970-0405
(Name of Person) (Area Code & Daytime Telephone Number)

Enclosed is a check for \$35.00 made payable to the Florida Department of State.

Mailing Address:
Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

Street Address:
Amendment Section
Division of Corporations
2661 Executive Center Circle
Tallahassee, FL 32301

**OFFICER / DIRECTOR RESIGNATION
FOR A CORPORATION**

FILED


2015 APR 23 PM 4:00

I, ARIADNA Rafuls, hereby resign as SECRETARY OF STATE
CHANCELLER, FLORIDA (Title)

of MDA Transportation Company
(Name of Corporation)

P14000005777, a corporation organized under the laws of the State of
(Document Number, if known)

Florida


(Signature of resigning officer/director)

FILING FEE IS \$35.00

Make checks payable to Florida Department of State and mail to:

Amendment Section
Division of Corporations
P.O. Box 6327
Tallahassee, Florida 32314